

Class	Subclass
Class	Subclass
ISSUE CLASSIFICATION	
08/210653	



TILITY ERIAL UMBER	08/210653	PATENT DATE	PATENT NUMBER		
SERIAL NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
08/210,653	03/10/94	606	077	3301	4/07

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****CONTINUING DATA*******

VERIFIED THIS APPLN IS A CON OF 07/965,069 10/22/92
WHICH IS A CON OF 07/604,094 10/29/90 ABN
WHICH IS A CON OF 07/279,978 12/05/88 ABN

****FOREIGN/PCT APPLICATIONS*******

VERIFIED

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***** SMALL ENTITY *****

Foreign priority claimed 35 USC 119 conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no	AS FILED →	STATE OR COUNTRY	SHEETS DRWGS.	TOTAL CLAIMS	INDEP. CLAIMS	FILING FEE RECEIVED	ATTORNEY'S DOCKET NO.
Verified and Acknowledged	Examiner's Initials		CA	9	5	1	\$355.00	P109361V

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TITLE DEVICE FOR ARTHROSCOPIC MENISCAL REPAIR

U.S. DEPT. of COMM.-Pat. & TM Office-PTO-436L (rev. 10-78)

PARTS OF APPLICATION FILED SEPARATELY		Applications Examiner		
NOTICE OF ALLOWANCE MAILED		CLAIMS ALLOWED		
		Total Claims	Print Claim	
Assistant Examiner				
ISSUE FEE		DRAWING		
Amount Due	Date Paid	Sheets Drwg.	Figs. Drwg.	Print Fig.
		ISSUE BATCH NUMBER		
Label Area		PREPARED FOR ISSUE		
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